

charged with performing abortions—and that this, in turn, means that American taxpayer funds will be used to subsidize abortion. This seemingly logical segue is absolutely and fundamentally incorrect.

Every hospital that performs a surgery—every physician that performs a procedure upon a patient—must figure out the cost of that procedure. This includes not only the time involved, but the materials, the overhead, the liability insurance. This is the fundamental and basic principle of covering one's costs.

I have faith that the Department of Defense will not do otherwise. This is the idea behind a privately-funded abortion—a woman's private funds, her own money pays for the procedure. But she has the opportunity to have this medical procedure—a medical procedure that is constitutionally guaranteed—in an American facility, performed by an American physician, and tended to by American nurses.

During last year's debate, opponents of repealing the current ban claimed that American taxpayers would be subsidizing the purchase of equipment for abortions, and would be training doctors to perform privately-funded abortions. This false argument effectively overlooks the fact that the Department of Defense has already invested in the equipment and training necessary because current law already provides access in cases of life of the mother, rape, or incest.

But the economic cost of this ban is not the only cost at issue here. What about the impact on a woman's health? A woman who is stationed overseas can be forced to delay the procedure for several weeks until she can travel to the United States or another overseas location in order to obtain the abortion. Every week that a woman delays an abortion increases the risk of the procedure.

The current law banning privately-funded abortions puts the health of these women at risk. They will be forced to seek out unsafe medical care in countries where the blood supply is not safe, where their procedures are antiquated, where their equipment may not be sterile. I do not believe it is right, on top of all the other sacrifices our military personnel are asked to make, to add unsafe medical care to the list.

I believe that a decision as fundamentally personal as whether or not to continue one's pregnancy only needs to be discussed between a woman, her family, and her physician. But yet, as current law stands, a woman who is facing the tragic decision of whether or not to have an abortion faces involving not just her family and her physician, but her—or her husband's—commanding officer, duty officer, miscellaneous transportation personnel, and any number of other persons who are totally and completely unrelated to her or her decision. Now she faces both the stress and grief of her decision—but

she faces the judgment and willingness of many others who are totally and wholly unconnected to her personal and private situation.

Imagine having made the difficult decision to have an abortion and then being told that you have to return to the United States or go to a hospital that may or may not be clean and sanitary. That is the effect of current policy—if you have the money, if you leave your family, if you leave your support system, and come back here. Otherwise, your full range of choices consists of paying from your own money and taking your chances at some questionable hospital that may or may not be okay.

This of course, is only if the country you are stationed in has legal abortion. Otherwise you have no option. You have no access to your constitutionally protected right of abortion.

What is the freedom to choose? It is the freedom to make a decision without unnecessary government interference. Denying a woman the best available resources for her health care simply is not right. Current law does not provide a woman and her family the ability to make a choice. It gives the woman and her family no freedom of choice. It makes the choice for her.

In the year 2000, in the United States of America it is a fact that a woman's right to an abortion is the law of the land. The Supreme Court has spoken on that issue, and you can look it up. Denying women the right to a safe abortion because you disagree with the Supreme Court is wrong, but that is what current law does.

Military personnel stationed overseas still vote, still pay taxes, and are protected and punished under U.S. law. They protect the rights and ideals that this country stands for. Whether we agree with abortion or not, we all understand that safe and legal access to abortion is the law of the land. But the current ban on privately-funded abortions takes away the fundamental right of personal choice from American women stationed overseas. And I don't believe these women should be treated as second class citizens.

It never occurred to me that women's constitutional rights were territorial. It never occurred to me that when American women in our armed forces get their visas and passports stamped when they go abroad—that they are required to leave their fundamental, constitutional rights at the proverbial door. It never occurred to me that in order to find out what freedoms you have as an American, you had to check the time-zone you were in.

The United States willingly sends our service men and women into harms way—yet Congress takes it upon itself to deny 14 percent of our Armed Forces personnel—33,000 of whom are stationed overseas—the basic right to safe medical care. And we deny the basic right to safe medical care to more than 200,000 military dependents who are stationed overseas as well.

How can we do this to our service men and women and their families? It seems to me that they already sacrifice a great deal to serve their country without asking them to take unnecessary risks with their health as well. We should not ask our military personnel to leave their basic rights at the shoreline when we send them overseas.

I believe we owe our men and women in uniform and their families the option to receive the medical care they need in a safe environment. They do not deserve anything less. I urge my colleagues to join me in supporting the Murray-Snowe amendment.

Mr. President, I yield the floor.

## RECESS

The PRESIDING OFFICER. Under the previous order, the hour of 12:30 p.m. having arrived, the Senate will now stand in recess until the hour of 2:15 p.m.

Thereupon, at 12:33 p.m., the Senate recessed until 2:15 p.m.; whereupon, the Senate reassembled when called to order by the Presiding Officer (Mr. SESSIONS).

## NATIONAL DEFENSE AUTHORIZATION ACT FOR FISCAL YEAR 2001—Continued

AMENDMENT NO. 3252

The PRESIDING OFFICER. We are now under controlled time. Who yields time?

The Senator from Washington.

Mrs. MURRAY. Mr. President, how much time remains on both sides?

The PRESIDING OFFICER. The Senator from Washington has 43 minutes remaining, and the opposition has 42 minutes.

Mrs. MURRAY. I thank the Chair.

Mr. President, I remind my colleagues of the issue we will be debating for the next 90 minutes. Basically, today a woman who serves in the military overseas at a facility, if she so desires to have an abortion—and it is her choice; it is her personal choice between herself and her family and her doctor and her religion—has to go to her commanding officer to ask for permission to come home to the United States to have a safe and legal abortion. Then she has to wait for military transport. She has to pay \$10, as the opponents told us this morning, for food on that military transport, and come home in order to have a safe and legal abortion.

The pending amendment simply allows women who serve in our military overseas today to pay for their own medical choice decisions in a military hospital where it is safe and is a place where they can be assured they will be taken care of, as we should expect we would take care of all people who serve us in the military.

I have heard our opponents speak this morning on this amendment and say it is unnecessary. I have a letter